UTILITY ATENT APPLICATION TRANSMITTAL

Attorney Docket No.	1954-417

First Inventor

Laurence J.N. COOPER et al.

Title MAMMALIAN ANTIGEN-PRESENTING T CELLS AND BI-SPECIFIC T CELLS

Applicant for Published Patent Application: City of Hope Duarte, California USA ADDRESS TO: Director of the United States Patent APPLICATION ELEMENTS and Trademark Office See MPEP chapter 600 concerning utility patent application contents. **BOX: Patent Application** Alexandria, Virginia 22313 X Fee Transmittal Form (WITHOUT PAYMENT) 7. CD-ROM or CD-R in duplicate, large table (Submit an original, and a duplicate for fee processing) or Computer Program 8. Nucleotide and/or Amino Acid Sequence Submission Applicant claims small entity status. 2. X a. Computer Readable Form (CRF) 3. X Specification Total pages [66] (preferred arrangement set forth below) b. Specification Sequence Listing on: - Descriptive title of the invention - Cross references to Related Applications i. CD-ROM or CD-R (2 copies); or - Statement Regarding Fed sponsored R&D paper - Reference to sequence listing, a table or a computer program listing appendix c. Statement verifying identity of above copies - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings **ACCOMPANYING APPLICATION PARTS** - Detailed Description 9. Assignment Papers (cover sheet & document(s)) - Claims 10. 37 CFR 3.73(b) Statement Abstract of the Disclosure (when there is an assignee) X Drawing(s) (35 USC 113) (Total Sheets) [22] Power of Attorney (Total Pages) [] Oath or Declaration 11. English Translation Document (if applicable) a. Newly executed (original or copy) 12. Information Disclosure Statement /PTO 1449 Copy from a prior application Copies of IDS Citations (37 CFR 1.63(d) 13. Preliminary Amendment (for continuation/divisional with Box 17 completed) 14. X Return Receipt Postcard (MPEP 503) [Note Box 5 below] (Should be specifically itemized) i DELETION OF INVENTOR(S) 15. Certified Copy of Priority Document(s). Signed statement attached deleting 16. Request and Certification under 35 U.S.C. inventor(s) named in the prior application, 122(b)(2)(B)(i). 6. X Application Data Sheet. 17. Other: 17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below or in an application Data Sheet under 37 CFR 1.76:: Continuation-in-part (CIP) of prior application No.: Continuation Divisional Prior application information: Examiner Group/Art Unit For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. Customer Number or Bar Code Label 6449 X Address Rothwell, Figg, Ernst & Manbeck Suite 800, 1425 K Street, N.W. City Washington D.C. State Zip Code 20005 202-783-6040 Fax Country U.S.A. Telephone 202-783-6031 Name Martha Cassidy, Reg. No. 44,066 Signature Date March 11, 2004

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U.S. PTO

Total Amount of Payment

FEE TRANSMITTAL for FY 2003 (Small Entity)

\$ 0.00

Complete if Known				
Application Number	To Be Assigned			
Filing Date	March 11, 2004			
First Named Inventor	Laurence J. N. Cooper			
Examiner Name	To Be Assigned			
Group Art Unit	To Be Assigned			
Attorney Docket Number	1954-417			

METHOD OF PAYMENT (check one)	FEE C	ALCU	_ATION (continued)	
1. The Commissioner is hereby author	ized to charge	3. AD	DITION	IAL FEES	
additional fees and credit any overpayment to		Fee	Fee		
Deposit Account Number 02-2135 i		Code	Paid	Fee Description	Fee Paid
Rothwell, Figg, Ernst & Manbeck		2051	65	Surcharge - late filing fee or oath	1
		2052	25	Surcharge - late provisional filing fee	i i
				or cover sheet	
Charge any Additional Fee Required	Under	1053	130	Non-English specification	f 1
37 CFR 1.16 and 1.17		1812	2,520	For filing a request for reexamination	i i
		1804	920	Requesting publication of SIR	ii
 X Applicant claims small entity status. 				prior to Examiner action	. ,
		1805	1,840*	Requesting publication of SIR	1
2. Payment Enclosed:		, , , ,	.,	after Examiner action	. ,
		2251	55	Extension for reply within first month	r 1
Check		2252	210	Extension for reply within second month	; ;
Credit Card		2253	475	Extension for reply within third month	1 1
		2254	740	Extension for reply within fourth month	1 1
FEE CALCULATION		2255	1,005	Extension for reply within fifth month	1 1
TEL CALCULATION		2401	165	Notice of Appeal	1 1
		2402	165	Filing a brief in support of an appeal	1 1
1. FILING FEE		2403	145	Request for Oral Hearing	1 1
Fee Fee		1451	1,510	Petition to institute a public use proceeding	+ +
Code \$ Fee Description	Fee Paid	2452	55	Petition to revive -unavoidable	i 1
	385.00]	2453	475	Petition to revive - unintentional	1 1
2002 170 Design Filing Fee	j	2501	665	Utility issue fee (or reissue)	l l
2003 265 Plant Filing Fee	Ī	2502	240	Design issue fee	[]
2004 385 Reissue Filing Fee	i	2503	320	Plant issue fee	[]
2005 80 Provisional Filing Fee	i	1460	130	Petitions to the Commissioner	ļ ,
•	•	1807	50	Processing fee under 37 CFR 1.17(q)	l j
SUBTOTAL	\$ 385.00	1806	180	Submission of Information Disclosure Statement	ļ
ODIOTAL	000.00	8021	40		
2. CLAIMS				Recording each patent assignment per property (times number of properties)	l J
Extra		2809	385	Filing a submission after final rejection	[]
Claims	Fee Fee Paid			(37 CFR .129(a))	
Total Claims [50] - 20** = [30] x Independent	\$ 9 = [270]	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	[]
Claims $[3] - 3^{**} = [] x$	43 = []	2801	385	Request for Continued Examination (RCE)	[]
	145 = [145]	1802	900	Request for expedited examination	į į
	•			of a design application	
**or number previously paid, if greater;		1504	300	Publication fee for early, voluntary, or normal publication	[]
CURTOTAL	445.00	1505	300	Publication fee for republication	r 1
SUBTOTAL \$	415.00	1455	200	Filing an application for patent term adjustment	[]
		1456	400	Request for reinstatement of term reduced	i j
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		5.1101 10	opoon	"	i J
		* Reduc	ed by Ba	sic Filing Fee Paid SUBTOTAL	\$

SUBMITTED BY			Complete (if applicable)		
NAME AND REG. NUMBER	Martha Cassidy, Reg. No. 44,066				
SIGNATURE	20	DATE	March 11, 2004	DEPOSIT ACCOUNT USER ID	02- 2135